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CONFIRMATION NO. 7183

SERIAL NUMBER 10/672,053	FILING OR 371(c) DATE 09/26/2003 RULE	CLASS 604	GROUP ART UNIT 3761	ATTORNEY DOCKET NO. 461.1005
APPLICANTS Arnold R. Leiboff, Stony Brook, NY;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 12/17/2003				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met <input type="checkbox"/> Allowance		STATE OR COUNTRY NY	SHEETS DRAWING 10	TOTAL CLAIMS 65
Verified and Acknowledged Examiner's Signature <i>LC Hill</i> Initials <i>LCR</i>		INDEPENDENT CLAIMS 7		
ADDRESS 22846				
TITLE Apparatus and method for intestinal irrigation				
FILING FEE RECEIVED 948	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	